प्राचार्य का कार्यालय
OFFICE OF THE PRINCIPAL
वर्धमान महावीर मेडिकल कॉलेज एवं सफ़दरजंग अस्पताल
VARDHMAN MAHAVIR MEDICAL COLLEGE & SAFDARJUNG HOSPITAL
नई दिल्ली - 110029
NEW DELHI - 110029
स्वास्थ्य सेवा महानिदेशालय, स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार
गुरु गोबिंद सिंह इंद्रप्रस्थ विश्वविद्यालय, दिल्ली से संबद्ध
Directorate General of Health Services, Ministry of Health & Family Welfare, Govt of India
Affiliated to Guru Gobind Singh Indraprastha University, Delhi

F.No. E 36752 ACDM-16011/03/2025 ACAD-VMMC Dated: 14 .07.2026

ADMISSION NOTICE

Sub: Instructions for candidates who are joining FNB Course 2025 admission session.

All FNB students who have been allotted various courses in this institution through Centralized Merit Based Counseling conducted by NBEMS are directed to bring the following documents in original for verification by the admission authority & in order to complete the admission & joining formalities. They should submit the following documents in original at the time of admission to authorities along with one set of self attested copies.

1. Seat Allotment Letter issued by NBEMS.
2. Admit Card issued by NBEMS in original.
3. Fellowship Entrance Test Score Card / Rank Letter
4. 10th & 12th Class Marksheet & Certificate for verification of date of birth.
5. MBBS degree certificate, MBBS 1st ,2nd and 3rd Prof. Part I & II marksheets.
6. Internship Completion Certificate.
7. Permanent Registration Certificate issue by MCI/State Medical Council for registration of MBBS qualification.
8. Post Graduate Medical Qualification Medical Degree / # Provisional Pass Certificate of qualifying examination (MD/MS/DM/MCh./DNB/DrNB).
9. Proof of declaration of result of Post Graduate Medical Qualification (MD/MS/DM/MCh./DNB/DrNB) on or before 31st December, 2025.
10. Proof of Post Graduate Medical Qualification (MD/MS/DM/MCh./DNB/DrNB) being recognized as per provisions of the NMC Act 2019.
11. Any document (Bonafide certificate/Marksheet/Atttempt Certificate etc issued by concerned institution/medical college) confirming the name of the institution/medical college from where the Post Graduate Medical Qualification (MD/MS/DM/MCh./DNB/DrNB) was pursued.
12. Character Certificate from the head of the institution from where the qualifying examination was passed.
13. Reliving order from previous institute (if working in any institute).
14. Copy of fee Receipt submitted to NBEMS.
15. Surety Bond (as per the enclosed format) of Rs. 1,50,000/- (Rupees One Lakh Fifty Thousand only) on a non-judicial stamp paper of Rs. 100/- with two sureties duly attested by Notary Public. (Sureties of Resident doctors (JR/PG/SR) not allowed.) (Format is available on website, can be prepared by candidates from anywhere in India).
16. Identity proof copy (Adhar card/Driving Lesence).
17. Passport size photos two.
18. One photocopy set of all documents (duly attested).

contd .....

Counseling Venue: Counseling Room, Ground Gloor, VMMC Building, VMMC & SJH, ND.

Note:

1. The candidates above documents will be physically verified by the Institution at the time of admission and if any discrepancy is found, the seat allotted and the admission will be cancelled.
2. Further, students are advised to visit NBEMS and Institute website regularly for updates regarding the counselling.
3. Only the candidate will be allowed in the Counselling Room. Candidates have to report for admission at Counselling Room near Principal Office, Ground Floor, VMMC College Building, VMMC & Safdarjung Hospital, Time for Reporting: 9.30 AM.
4. # Provisional Pass certificate of the Post Graduate Medical Qualification (MD/MS/DM/M.Ch/DNB/DrNB) in lieu of Degree certificate is acceptable only for those candidate who have qualified their Post Graduate Medical Qualification (MD /MD / DM/ M.Ch./ DNB/DrNB) but have not been issued their degree certificates by respective universities/boards. A certificate from the university/board conerned shall be required to be submitted by such candidates at the time of counselling confirming that the degree shall be conferred in the next convocation.

PRINCIPAL
VMMC & SAFDARJUNG HOSPITAL

(To be executed on a non-judiciary stamp paper of Rs. 100/-)

UNDERTAKING/SURETY BOND

Undertaking is executed at _____ on this _____ day of _____ 20_____ by Dr. _____ son/daughter of _____ resident of _____ (hereinafter referred to as 'student') enrolled in DNB/FNB _____, Safdarjung Hospital, New Delhi.

Whereas the student has applied and has been selected for the DNB/DrNB/FNB _____ conducted by the National Board of Examinations in Medical Sciences, New Delhi.

Whereas on the basis of the merit the student has been admitted to _____ subject to the undertaking that in case the student leaves the course in between he/she shall be liable to deposit a sum of Rs. 1.5 lakhs (Rupees one lakh and fifty thousand only) with Safdarjung Hospital.

Whereas the student undertakes that till the entire surety amount of Rs. 1.5 lakhs (Rupees one lakh and fifty thousand only) is paid, Safdarjung Hospital, New Delhi shall have the right to retain the original certificates of the student.

Whereas I have requested Mr./Ms. _____ Son of / daughter of _____ resident of _____ and Mr. / Ms. _____ Son of/daughter of _____ resident of _____ who stand surety for me for the payment of the said amount.

Signature of the Student

That I _____ son of / daughter of _____ resident of _____ student aforesaid acknowledge my indebtedness to the Safdarjung Hospital, New Delhi to a sum of Rs. 1.5 lakhs (Rupees one lakh and fifty thousand only) which I hereby promise to pay on demand to Safdarjung Hospital, New Delhi.

Signature of the Student

In consideration of the undertaking given by Dr. ..... son/daughter of ..... resident of ..... to Safdarjung Hospital for a sum of Rs. 1.5 lakhs (Rupees one lakh and fifty thousand only), I ..... hereby stand as surety for the payment of the said amount on the terms mentioned above. In case Dr. ....., student fails to pay on demand a sum of Rs.1.5lakhs (Rupees one lakh and fifty thousand only), I the said surety shall without objection pay the said due amount to Safdarjung Hospital on demand.

Sd/-
Surety
(Name, address, mobile no., pan no with copy of pan card. & e-mail id)

In consideration of the undertaking given by Dr. ..... son/daughter of ..... resident of ..... to Safdarjung Hospital for a sum of Rs. 1.5 lakhs (Rupees one lakh and fifty thousand only), I ..... hereby stand as surety for the payment of the said amount on the terms mentioned above. In case Dr. ....., student fails to pay on demand a sum of Rs. 1.5 lakhs (Rupees one lakh and fifty thousand only), I the said surety shall without objection pay the said due amount to Safdarjung Hospital on demand.

Sd/-
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